Form (RF-3)		SUMMARY SHEET	
	nange in Company's provision effective	emium or rate level produced by rate 05/01/09	<u> </u>
(1		(2) Statewide Annual	(3) Percent Change
Cov	verage	Premium Volume *	(+ or -)**
<ol> <li>Automobile Liab         Private Passe</li></ol>	nger sical Damage		
Commercial	90.		
<ol> <li>Liability Other Th</li> <li>Burglary and Tho</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Mach</li> <li>Fire</li> <li>Extended Cover</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Mul</li> <li>Crop Hail</li> <li>Other</li> </ol>	inery age ti-Peril	\$2,367,228	7.5%
	neral Liability Loss Cos	es of an advisory organization, specify org	ganization):
* Adjusted to reflect	t all prior rate changes.	ch will result from application of new rates  American Home Assurance ( Name of Company  Joan D. Baskerville - Filings  Official - Title	Company

	revision effective May $1$ , (1)	(2)	(3)
	, ,	Annual Premium	Percent
	<u>Coverage</u>	<pre>Volume (Illinois)*</pre>	Change (+ or - ) * *
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass	430,418	7.5
6. 7.	Fidelity Surety		
8.	Boiler and Machinery Fire		
9. 0. 1.	Extended Coverage Inland Marine		
2.	Homeowners		
3. 4. 5.	Commercial Multi-Peril Crop Hail Other		
	Line of Insurance		
			•
	s filing only apply to certain sses?: If so, specify:	n territory (territor No	ies) or certain
	ef description of filing. (If anization, specify organization		s of an advisory
_	Adopt ISO's revised loss costs	5 for General L	ability

AXA Insurance Co.

<sup>\*</sup> Adjusted to reflect all prior rate changes.

-orm	1 (RF-3)	SUMMARY SHEET	
	Change in Company's p revision effective	remium or rate level produced by rate 05/01/09	·
	(1)	(2) Statewide Annual	(3) Percent Change
	_ Coverage	Premium Volume *	(+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3	Liability Other Than Auto	\$129,158	7.5%
	Burglary and Theft	4	
	Glass		
	Fidelity	· · · · · · · · · · · · · · · · · · ·	
	Surety		
	Boiler and Machinery		
	Fire		•
	Extended Coverage	<del> </del>	
	Inland Marine	·	
	Homeowners Commercial Multi-Peril		
		<del></del>	
	Crop Hail		<del></del>
Ο.	Other Line of Insurance		
	Line of insurance		
	s filing only apply to certain territory(s) o		
		tes of an advisory organization, specify org	ganization):
	otion of ISO's General Liability Loss Co	sts Revision	
)esi	gnation Number: GL-2008-BGL1		
* ^	divisted to reflect all major rate aboves		
	djusted to reflect all prior rate changes		
C	nange in Company's premium level wh	ich will result from application of new rates	
		Commerce and Industry Insuran	ce Company
		Name of Company	
		Joan D. Baskerville - Filings	Analyst
		Official - Title	

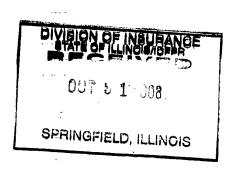
Change in Company's premium or rate level produced by rate Revision effective 2-1-2009

	(1)	A	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	$\underline{\mathbf{V}}$	olume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial	<del> </del>		
2.				
3.	Liability Other Than Auto		342,687	+2.0%
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity	-		
7.	Surety			
8.	Boiler and Machinery	···········		
9.	Fire			
10.	Extended Coverage		·	
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other			
	Line of Insurance			
Does no	filing only apply to certain territory	-	es) or certain classes? If s	so, specify:
			****	
	description of filing. (If filing follo			
		** *		W-1.
	djusted to reflect all prior rate chan	ges.		
** .C	hange in Company's premium level	which wi	il result from application	of new rates.
	en e		Continental West	ern Insurance Company
,	, .	•		of Company
	· · · · ·		T tuffe	or company
		• •	ALC TO A CONTRACT OF THE CONTR	
	9 77.00 17 77.00		Teresa Wineland	- Sr. Research/Statistical
-				Analyst
				cial - Title
S	The second second second second second	S 22	· parent	

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/1/2009

	(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	<u>Coverage</u>	volume (minois)	Change (1 Of 4)
1.	Automobile Liability		
	Commercial		
2.	Automobile Physical Damage Commercial		
3.	Liability Other Than Auto	50,471	7.50%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
	Inland Marine		
	Homeowners		
13.	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
Doe	es filing only apply to certain territory (	(territories) or certain classes? If so, specify:	
NO			
Brie	of description of filing. (If filing follows	rates of an advisory organization, specify org	anization):
Ador	otion of ISO reference GL-2008-BGL1.	Aboption of loss Costs	
	justed to reflect all prior rate changes		
**C	hange in Company's premium level w	hich will result from application of new rates.	
		•	
		Crum & Forster Indemnity Con	npany
		Na	me of Company
		•	·
		Sharon D. Smith, Regulatory C	Compliance Analyst
		<del></del>	Official – Title



Change in Company's premium or rate level produced by rate revision effective 5/1/09 .

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -) **
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage	· · · · · · · · · · · · · · · · · · ·	
Private Passenger Commercial		
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety	471,761	+16.4%
8. Boiler and Machinery 9. Fire		
10. Extended Coverage 11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain to If so, specify:  Brief description of filing. (If forganization, specify organization)	iling follows rates of a	n advisory
	Our File Number: GL	_
* Adjusted to reflect all prior rat ** Change in Company's premium level result from application of new ra	L which will	
	CUMIS Insurance Socie	ety, Inc.
	Name of Compa	
	Jeslie O Svv Official - Tit	boda
	Official - Tit	le

	Change in Company's pre revision effective	May 1, 2009	by rate 
	(1)	(2) Annual Premiun	
	<u>Coverage</u>	Volume (Illinois)	<u>* Change ( + or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	<del></del>	
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	* \$6,854,955	7.5%
4.	Burglary and Theft		
<b>5</b> .	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance	t 0007 Military Duaming	
		* 2007 Written Premium	
D	- Filing only comby to contain together	n, (tarritarias) ar cartain	
	s Filing only apply to certain territor ses? If so, specify:	y (territories) or certain	
olas			
		× ·	
	f description of filing. (If filing follov	vs rates of an advisory	
orga	anization, specify organization):	Adoption of ISO's Gene	ral Liability Advisory Prospective
		Loss Costs revision	
	* Adjusted to reflect all prior rate cl	nanges.	
	* Change in Company's premium I		
	result from application of new rate		
	том том триновиом от том		Discover Property & Casualty
			Insurance Company
		· modern	Name of Company
		1 401 /401	• •
		•••	
		*****	
			Arthur W. Wright, President
			Official - Title

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level p	03/01/09	
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial	4.045.050	1.7%
3. Liability Other Than Auto	1,645,850	1.7%
4. Burglary and Theft		
5. Glass 6. Fidelity		
7. Surety	· · · · · · · · · · · · · · · · · · ·	
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (territory	tories) or certain classes? If so, specify:	·
Brief description of filing. (If filing follows rate BCL Rate Revision and Adoption of ISO	Filings CU-2004-OFR03, CU-2004-RRU	J03, CU-2004-OSIEF,_
CU-2004-OSIER, CU-2005-OFR05, CU-	2005-ORU05, CU-2007-OCTFR, CU-20	07-OCTRU
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	will result from application of new rates	
	Erie Insurance	
	Name of Co	empany L
	Ross C. Fonticella,	ACAS, MAAA
	Vice President a	

Forr	m (RF-3)			
		nge in Company's pi	remium or rate level produced by rate 05/01/09	· ·
	(1) 	rage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1.	Automobile Liabilit	=		
2.	Commercial Automobile Physic Private Passen Commercial	_		
3. 4. 5.	Liability Other Tha Burglary and Thef		\$10,355,142	7.5%
6.	Fidelity Surety	ery		
9. 10. 11.	Fire Extended Coverag Inland Marine			
14.	Commercial Multi- Crop Hail	Peril		
	Other Line of Ins			
Doe	es filing only apply to	certain territory(s)	or certain class(s)? If so, specify:	
Add	option of ISO's Gene	g. (If filing follows ra eral Liability Loss Co GL-2008-BGL1	ntes of an advisory organization, spec ests Revision	ify organization):
Des	signation Number:	GL-2008-BGL1		
* .	Adjusted to reflect a Change in Company	ıll prior rate changes 's premium level wh	s. nich will result from application of new •	rates.
			Granite State Insuran	
			Name of Com Joan D. Baskerville - F	•
			Official - Ti	

Change in Company's premium company's premium 6/1/20		by rate
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
<ol> <li>Automobile Liability         Private Passenger         Commercial</li> <li>Automobile Physical Damage         Private Passenger</li> </ol>		
Commercial	3,654,575	-0.54%
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass	3,634,575	-0.543
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
ll. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril		
13. Commercial Multi-Felli 14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain  If so, specify: General Liabilit	territory (territories)or ty classes 10072, 10073, 10	certain classes? 0075, 46603 and 46604
Does filing only apply to certain  If so, specify: General Liabilit	territory (territories)or ty classes 10072, 10073, 10	certain classes? 0075, 46603 and 46604
If so, specify: General Liabilit  Brief description of filing. (If	f filing follows rates of a	on advisory action in the Loss Cost cal Liability classes 46603 and 46604.
If so, specify: General Liabilit  Brief description of filing. (If	filing follows rates of a multipliers for Gener 10072, 10073, 10075,	on advisory action in the Loss Cost cal Liability classes 46603 and 46604.
If so, specify: General Liability  Brief description of filing. (If organization, specify organization)  * Adjusted to reflect all prior	filing follows rates of a on): We propose a 15% redu Multipliers for Gener 10072, 10073, 10075,  The impact of this cherate changes.	on advisory action in the Loss Cost cal Liability classes 46603 and 46604.
** Change in Company's premium le	filing follows rates of a on): We propose a 15% redu Multipliers for Gener 10072, 10073, 10075,  The impact of this cherate changes.	on advisory action in the Loss Cost cal Liability classes 46603 and 46604.
The so, specify: General Liability  Brief description of filing. (If organization, specify organization)  * Adjusted to reflect all prior  ** Change in Company's premium le	filing follows rates of a Multipliers for Gener 10072, 10073, 10075,  The impact of this character changes. Evel which will rates.  Grinnell Mutual Reinsura	on advisory action in the Loss Cost al Liability classes 46603 and 46604.  The ange is -0.41%.
The so, specify: General Liability  Brief description of filing. (If organization, specify organization)  * Adjusted to reflect all prior  ** Change in Company's premium le	filing follows rates of a on): We propose a 15% redu Multipliers for Gener 10072, 10073, 10075,  The impact of this cherate changes. Evel which will rates.	on advisory action in the Loss Cost al Liability classes 46603 and 46604.  The ange is -0.41%.
The so, specify: General Liability  Brief description of filing. (If organization, specify organization)  * Adjusted to reflect all prior  ** Change in Company's premium le	filing follows rates of a Multipliers for Gener 10072, 10073, 10075,  The impact of this character changes. Evel which will rates.  Grinnell Mutual Reinsura	on advisory action in the Loss Cost al Liability classes 46603 and 46604.  The ange is -0.41%.
The so, specify: General Liability  Brief description of filing. (If organization, specify organization)  * Adjusted to reflect all prior  ** Change in Company's premium le	filing follows rates of a Multipliers for Gener 10072, 10073, 10075,  The impact of this character changes. Evel which will rates.  Grinnell Mutual Reinsura	on advisory action in the Loss Cost al Liability classes 46603 and 46604.  The ange is -0.41%.
The so, specify: General Liability  Brief description of filing. (If organization, specify organization)  * Adjusted to reflect all prior  ** Change in Company's premium le	filing follows rates of a Multipliers for Gener 10072, 10073, 10075,  The impact of this character changes. Evel which will rates.  Grinnell Mutual Reinsura	on advisory action in the Loss Cost al Liability classes 46603 and 46604.  The ange is -0.41%.

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in	Company's premium or rate le	vel produced by rate revision e	effective01/19/2009	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)*</u>	* -
1 Autom	obile Liability Private			
	ssenger Commercial			
2. Autom	obile Physical Damage			
Pri 3. Liabilit	vate Passenger Commercial y Other Than Auto	\$342,018	5.0%	Derson
	ry and Theft	ΨΟ-12,010		Tunba
5. Glass				
6. Fidelity				<del></del>
<ol> <li>Surety</li> <li>Boiler :</li> </ol>	and Machinery			
9. Fire				
	led Coverage			
11. Inland 12. Homeo	-			
	ercial Multi-Peril			
14. Crop F				
15. Other	Line of Insurance	<u> </u>		
	only apply to certain territory (			
	Minimum Premium amount and			
*Adjusted 1	to reflect all prior rate changes		•	
**Change i	in Company's premium level w	hich will result from application	of new rates.	
	i,		Hanover Insurance Company	
	',	and the second s	Name of Company	
			Susan Whitworth - Product Specialist	
			Official – Title	
		AND THE RESERVE TO THE PROPERTY OF THE PARTY		
•	,	And the second s		
		There is a second of the s		
	,	composed to the control of the control of		
		\$100 per 1 p		
		Total Section Section		
		processing and the second seco		
		term of the state of the		
	post disc	ng mananan		
	et tradi	The state of the s		
		n will are the total accident		

Form (RF-3)		SUMMARY SHEET	
	Change in Company's prevision effective	oremium or rate level produced by rate 05/01/09	_·
	(1)	(2) Statewide Annual	(3) Percent Change
	Coverage	Premium Volume *	(+ or -)**
1. Automo	bile Liability		
	te Passenger		. <u></u>
	mercial		
2. Automo	bile Physical Damage		
	te Passenger		
	mercial		
3. Liability	Other Than Auto	\$5,066,008	7.5%
4. Burglar			
5. Glass			
6. Fidelity			
7. Surety			
	nd Machinery		
9. Fire			
	ed Coverage		
11. Inland N			
12. Homeo			
	ercial Multi-Peril		
14. Crop Ha	ail		
5. Other			
	Line of Insurance		
Does filing o	nly apply to certain territory(s)	or certain class(s)? If so, specify:	· · · · · · · · · · · · · · · · · · ·
Adoption of I	ISO's General Liability Loss Co	ates of an advisory organization, specify org osts Revision	anization):
Designation	Number: GL-2008-BGL1		· · · · · · · · · · · · · · · · · · ·
	to reflect all prior rate change n Company's premium level w	hich will result from application of new rates  National Union Fire Insurance Compan  Name of Company	y of Pittsburgh, Pa.
		Joan D. Baskerville - Filings	Analyst
		Official - Title	

### ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate leve	el produced by rate revision effective	1/15/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Private Passenger Commercial		
3. Liability Other Than Auto	1,239,247	+8.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
44 International		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (te	erritories) or certain classes? If so specif	v. No
Does ming only apply to certain territory (to	interiory of octain oldocos. If so, specifi	y. <u>110</u>
Brief description of filing. (If filing follows ra Liability rate increase of 8.0 percent	ates of an advisory organization, specify o	
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level wh	ich will result from application of new rate	es.
	Nationwide	Mutual Insurance Company
	- TARIOIMIGE	Name of Company
		·
	Kara E. Kar	oustar – Senior Filings Analyst
		Official – Title

-orm (RF-		SUMMARY SHEET	
	Change in Company's revision effective	oremium or rate level produced by rate 05/01/09	
	(1)	(2) Statewide Annual	(3) Percent Change
	Coverage	Premium Volume *	(+ or -)**
1 Auton	nobile Liability		
	vate Passenger		
	mmercial		
	nobile Physical Damage		
	vate Passenger		
	mmercial		
		\$4,410,876	7.5%
	ty Other Than Auto	Ψ-,-10,010	7.070
5. Glass	ary and Theft		
6. Fideli	*		
7. Suret			
	and Machinery		
9. Fire	4-40		
	ded Coverage		
	d Marine		
	eowners		
	nercial Multi-Peril		
14. Crop		<u></u>	
15. Other			
	Line of Insurance		
Brief desc		or certain class(s)? If so, specify:  rates of an advisory organization, specify orgosts Revision	ganization):
	ed to reflect all prior rate change e in Company's premium level w	es. which will result from application of new rates	<b>.</b>
	_	New Hampshire Insurance C	Company
		Name of Company	
		Joan D. Baskerville - Filings	s Analyst
	_	Official - Title	

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

		4.5
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)*
Automobile Liability		
Commercial  Automobile Physical Damage		
. Automobile Physical Damage Commercial		
Liability Other Than Auto	3,989,997	7.50%
. Burglary and Theft	3,303,331	
. Glass		
. Fidelity		
. Surety		
. Boiler and Machinery		
. Fire		
Extended Coverage		
1. Inland Marine		
2. Homeowners	er <u>e la la casa de la</u>	
Commercial Multi-Peril		
4. Crop Hail		
5. Other		
5. Other		
5. Other Line of Insurance	• •	pecify:
5. Other  Line of Insurance  oes filing only apply to certain terri	itory (territories) or certain classes? If so, s	pecify:
5. Other  Line of Insurance  Does filing only apply to certain terri	itory (territories) or certain classes? If so, s	
5. Other	itory (territories) or certain classes? If so, s	ecify organization):
Line of Insurance  oes filing only apply to certain terrical serions of filing. (If filing follows)	itory (territories) or certain classes? If so, s	ecify organization):
Line of Insurance  oes filing only apply to certain terrical serions of filing. (If filing follows)	itory (territories) or certain classes? If so, s	ecify organization):
Line of Insurance  Coes filing only apply to certain terrical  Coesing only apply to c	itory (territories) or certain classes? If so, s  lows rates of an advisory organization, spe  Adoption of Loss Costs	ecify organization):
Line of Insurance  Coes filing only apply to certain terrical  Prief description of filing. (If filing folloption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	itory (territories) or certain classes? If so, so lows rates of an advisory organization, spendoption of Costs	ecify organization):
Line of Insurance  Line of Insurance  Does filing only apply to certain terrico  Dirief description of filing. (If filing follooption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	itory (territories) or certain classes? If so, s  lows rates of an advisory organization, spe  Adoption of Loss Costs	ecify organization):
Line of Insurance  Line of Insurance  Does filing only apply to certain terrico  Dirief description of filing. (If filing follooption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, spendaption of Loss Costs anges.	ecify organization):  w rates.
Line of Insurance  Line of Insurance  Does filing only apply to certain terrico  Dirief description of filing. (If filing follooption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	itory (territories) or certain classes? If so, so lows rates of an advisory organization, spendoption of Costs	ecify organization):  w rates.  urance Company
Line of Insurance  Coes filing only apply to certain terrico  rief description of filing. (If filing folloption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, spendaption of Loss Costs anges.	ecify organization):  w rates.
Line of Insurance  Line of Insurance  Does filing only apply to certain terrico  Dirief description of filing. (If filing follooption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, specific control of the control of the lower	ecify organization):  w rates.  urance Company
Line of Insurance  Coes filing only apply to certain terrico  rief description of filing. (If filing folloption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, specific control of the control of the lower	w rates.  urance Company Name of Company
Line of Insurance  Does filing only apply to certain terrico  Brief description of filing. (If filing folloption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, specific control of the control of the lower	ecify organization):  w rates.  urance Company Name of Company egulatory Compliance Anaylst
Line of Insurance  Does filing only apply to certain terrico  Brief description of filing. (If filing folloption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, specific control of the control of the lower	ecify organization):  w rates.  urance Company Name of Company egulatory Compliance Anaylst
Line of Insurance  Does filing only apply to certain terrico  Brief description of filing. (If filing folloption of ISO reference GL-2008-BGL1  Adjusted to reflect all prior rate cha	Itory (territories) or certain classes? If so, so lows rates of an advisory organization, specific control of the control of the lower	ecify organization):  w rates.  urance Company Name of Company egulatory Compliance Anaylst



(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
Automobile Liability     Private Passenger     Commercial		
Automobile Physical Damage     Private Passenger     Commercial		
<ol> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> </ol>	\$1,934,448	-0.08%
5. Glass		
6. Fidelity		
7. Surety 8. Boiler and Machinery	· ·	
9. Fire		
0. Extended Coverage		
Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance		
is filing is to redefine our attachment roints for all of the auto liability limits in	s rates of an advisory organization, specify points for our personal umbrella program. V which we could attach a personal umbrella	Ve are now introducing price
written premium neutral.  /e are proposing an effective date of F	ebruary 19, 2009 and a renewal date of Ma	arch 31, 2009.
/e are proposing an effective date of F  Adjusted to reflect all prior rate chai		
/e are proposing an effective date of F  Adjusted to reflect all prior rate char	nges. el which will result from application of new I	
/e are proposing an effective date of F  Adjusted to reflect all prior rate char	nges. el which will result from application of new i Safeco Insura	rates.
/e are proposing an effective date of F  Adjusted to reflect all prior rate char	nges. el which will result from application of new i Safeco Insura	rates. nce Company of Illinois
e are proposing an effective date of F  Adjusted to reflect all prior rate char	nges. el which will result from application of new i Safeco Insura	rates.  nce Company of Illinois

	revision effective	June 1, 2009	
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change ( + or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$217,881	+7.5%
1.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	40	
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	٠.	
14.	Crop Hail		
15.	Other		
10.	Line of Insurance		
	s Filing only apply to certain territor ses? If so, specify:	y (territories) or certain	
	:		
	f description of filing. (If filing follow nization, specify organization):	Adoption of ISO's Revised Comm	
		Advisory Prospective Loss Costs	Revision
•		· 40.44	
	<ul> <li>Adjusted to reflect all prior rate ch</li> </ul>		
*	* Change in Company's premium le	evel which will	
	result from application of new rate	<b>28.</b>	
	e e e e e e e e e e e e e e e e e e e	Seneca Insurance Compa	
	• •		Name of Company
	***		
	· ·		

Kevin Purcell - VP IRC, LLC

Official - Title

hang	e in Company's premium or rate leve	el produced by rate revision effective	May 1, 2009
	(1)	(2)	(3)
		Annual Premium	Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$320,612	7.5%
4.	Burglary and Theft		
۰. 5.	Glass		
	Fidelity		
6. 7	<del>-</del>		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
0.	Extended Coverage		
١.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
٥.	Line of Insurance		
oc f	iling only apply to certain territory (	territories) or certain classes? If so	snecify:
). ).	• • • • • • • • • • • • • • • • • • • •	controlles) of coralli classes. It so,	
iof d	lescription of filing. (If filing follow	re rates of an advisory organization	specify organization):
ting	Organization: Insurance Services O	ffice. Inc. (ISO)	specify organization).
-20	08-BGL1, General Liability Advisor	ry Prospective Loss Costs	
-20	00-BOLT, Ocheral Elability Advisor	y i respective Less costs	
: A	ijusted to reflect all prior rate change	·	
	nange in Company's premium level v		
	sult from application of new rates.	vincii wiii	
re	suit from application of new rates.		
	•		
	•		
			Stonington Insurance Company
		•	Name of Company
	•	•	
	*	•	
		• • • •	Senior Counsel - Compliance Mana
			Official - Title

### ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	evel produced by rate revision effective	May 1, 2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private     Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	\$362,492	7.5%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
<ul><li>12. Homeowners</li><li>13. Commercial Multi-Peril</li></ul>		
14. Crop Hail		A CONTRACTOR OF THE CONTRACTOR
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	y: <u>N/A</u>
Brief description of filing. (If filing folloreference filing GL-2008-BGL1	ows rates of an advisory organization, s	specify organization): <u>Adoption of ISO</u>
*Adjusted to reflect all prior rate changes	3."	
**Change in Company's premium level v	which will result from application of new rate	es.
	SU	A Insurance Company
		Name of Company
	Michael Gooding, Dire	ector of Regulatory Affairs & Legal Com

,		09	<del>-</del> '
(1)		(2)	(3)
(-7	,	Annual Premium	Percent
Coverage	ge \	/olume (Illinois)*	Change ( + or -)**
Automobile Liability			
Private Passenger			
Commercial			
Automobile Physical	Damage		
Private Passenger		***	
Commercial			
Liability Other Than	Auto	\$4,030	7.5%
Burglary and Theft			
Glass			
Fidelity			
Surety			
Boiler and Machinery	y		
Fire	<del>-</del>		
Extended Coverage			
Inland Marine			
Homeowners	<u> </u>		
Commercial Multi-Pe	eril — — — — — — — — — — — — — — — — — — —		
Crop Hail			
Other			
Line of Insura	ance		
Line of Insura	ance	e de la companya de l	
es Filing only apply to c	ance certain territory (territories)	or certain	
s Filing only apply to c		or certain	
s Filing only apply to c		or certain	
s Filing only apply to c		or certain	
es Filing only apply to c ses? If so, specify:	certain territory (territories)		
s Filing only apply to c ses? If so, specify:  f description of filing.	ertain territory (territories)	advisory	I Liability Adversory Prospecti
s Filing only apply to c ses? If so, specify: description of filing.	certain territory (territories)  (If filing follows rates of an nization):  Adoption	advisory	l Liability Adversory Prospecti
s Filing only apply to c ses? If so, specify:	certain territory (territories)  (If filing follows rates of an nization):  Adoption	advisory of ISO's Genera	I Liability Adversory Prospecti
s Filing only apply to c ses? If so, specify:  f description of filing. (anization, specify organ	certain territory (territories)  (If filing follows rates of an nization):  Adoption	advisory of ISO's Genera t Revision	I Liability Adversory Prospecti
s Filing only apply to c ses? If so, specify:  f description of filing.	certain territory (territories)  (If filing follows rates of an nization):  Adoption	advisory of ISO's Genera t Revision	l Liability Adversory Prospecti
Filing only apply to codes? If so, specify:  description of filing. (nization, specify organ	(If filing follows rates of an nization):  Adoption Loss Cos	advisory of ISO's Genera t Revision	l Liability Adversory Prospecti
s Filing only apply to coses? If so, specify:  description of filing. (nization, specify organ	(If filing follows rates of an anization):  Adoption Loss Cos	advisory of ISO's Genera t Revision	I Liability Adversory Prospecti
s Filing only apply to coses? If so, specify:  description of filing. (nization, specify organization, specify organization)	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	I Liability Adversory Prospecti
s Filing only apply to coses? If so, specify:  f description of filing. (anization, specify organization)	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	I Liability Adversory Prospecti
s Filing only apply to coses? If so, specify:  f description of filing. (anization, specify organ  * Adjusted to reflect al  * Change in Company	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	
* Adjusted to reflect al  * Change in Company result from application	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	Technology Insurance Co.
s Filing only apply to coses? If so, specify:  f description of filing. (inization, specify organization, specify organization)  * Adjusted to reflect al  * Change in Company result from application	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	
* Adjusted to reflect al	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	Technology Insurance Co.
es Filing only apply to coses? If so, specify:  ef description of filing. (anization, specify organ  * Adjusted to reflect al  ** Change in Company result from application	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes.	advisory of ISO's Genera t Revision	Technology Insurance Co.  Name of Company
es Filing only apply to coses? If so, specify:  of description of filing. (anization, specify organ  * Adjusted to reflect al  ** Change in Company result from application	(If filing follows rates of an anization):  Adoption Loss Cost  Il prior rate changes. I's premium level which with on of new rates.	advisory of ISO's Genera t Revision	Technology Insurance Co.

Change in	Company's	premium	or	rate	level	produced	by	rate
	effective							

1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 59,931 +20.0 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC We request that this filing be applicable to all policies effective on or after	(1)	(2) Annual Premium	(3) Percent
Private Passenger Commercial  2. Automobile Physical Damage Private Passenger Commercial  3. Liability Other Than Auto 59,931 +20.0  4. Burglary and Theft  5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC We request that this filing be applicable to all policies effective on or after	Coverage	<pre>Volume (Illinois) *</pre>	Change (+ or -) **
Private Passenger Commercial  3. Liability Other Than Auto 59,931 +20.0  4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance  Does filing only apply to certain territory (territories) or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC We request that this filing be applicable to all policies effective on or after	Private Passenger Commercial		
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	Private Passenger		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	4. Burglary and Theft 5. Glass	59,931	+20.0
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	7. Surety		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	-		
12. Homeowners  13. Commercial Multi-Peril  14. Crop Hail  15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	10. Extended Coverage		
13. Commercial Multi-Peril  14. Crop Hail  15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	,		
14. Crop Hail  15. Other  Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	12. Homeowners		
Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	13. Commercial Multi-Peril		
Line of Insurance  Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	14. Crop Hail		
Does filing only apply to certain territory (territories)or certain classes?  If so, specify: No  Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	15. Other		
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after	Line of Insurance		
organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after		territory (territories)or	c certain classes?
organization, specify organization): Adoption of ISO Loss Costs filing number GL-2006-RCTLC  We request that this filing be applicable to all policies effective on or after			
January 1, 2009.	Brief description of filing. (If organization	a): Adoption of ISO Loss GL-2006-RCTLC We request that this	Costs filing number filing be applicable

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

 TRANSGUARD	INSURANCE	COMPANY	OF	AMERICA,	INC.
	Name o	of Compar	JÀ		

Joyelle Endres, AIS, API, IR - Compliance Support Analyst
Official - Title

H29219D

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/1/2009

(1) <u>Coverage</u>		(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
. Automobile Liability			
Commercial			
<ul> <li>Automobile Physical Dama Commercial</li> </ul>	ige		
. Liability Other Than Auto	1,278,68	6	7.50%
. Burglary and Theft			
Glass			
. Fidelity			
. Surety			
Boiler and Machinery			
. Fire			
Extended Coverage			
Inland Marine			
2. Homeowners	<u> </u>		
3. Commercial Multi-Peril			
4. Crop Hail			
5. Other			
Line of Insurance	37.7		
rief description of filing. (If filin	territory (territorie g follows rates of a	an advisory organization, specify	organization):
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	an advisory organization, specify  Aboption of Loss Costs	
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	an advisory organization, specify  Abotion of Loss Costs  result from application of new ra	tes.
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	an advisory organization, specify  Aboption of Loss Costs	tes. nce Company
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	an advisory organization, specify  Abotion of Loss Costs  result from application of new ra	tes.
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	an advisory organization, specify  Abotion of Loss Costs  result from application of new ra	tes. nce Company Name of Company
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	result from application of new ra  United States Fire Insura	tes. nce Company Name of Company
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	an advisory organization, specify  Abotion of Loss Costs  result from application of new ra  United States Fire Insura	tes. nce Company Name of Company tory Compliance Analyst
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula	tes.  nce Company  Name of Company  tory Compliance Analyst  Official – Title
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filin doption of ISO reference GL-2008-BG Adjusted to reflect all prior rate	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a L1 , e changes. Im level which will	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSU STATE OF ILLINOIS	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premiu	g follows rates of a L1 , e changes. Im level which will	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSU STATE OF ILLINOIS	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a L1 , e changes. Im level which will	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing deption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a L1 , e changes. Im level which will	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS  OCT 3 1 200	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS  OCT 3 1 200	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS  OCT 3 1 200  SPRINGEIELD III.	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS  OCT 3 1 200	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS  OCT 3 1 200	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing toption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS  OCT 3 1 200  SPRINGFIELD, ILL	nce Company Name of Company tory Compliance Analyst Official – Title
rief description of filing. (If filing deption of ISO reference GL-2008-BG Adjusted to reflect all prior rate Change in Company's premium	g follows rates of a	result from application of new ra  United States Fire Insura  Sharon D. Smith, Regula  DIVISION OF INSUSTATE OF ILLINOIS,  OCT 3 1 200  SPRINGFIELD, ILL	nce Company Name of Company tory Compliance Analyst Official – Title

	revision effective	May 1, 2009	
	(1)	(2) Annual Premi	
	<u>Coverage</u>	Volume (Illinoi	<u>is)*</u> <u>Change ( + or -)**</u>
1.	Automobile Liability		
••	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$26,251	7.5%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		•••	. *
	s Filing only apply to certain territor ses? If so, specify:	y (territories) or certain	
	•		
	f description of filing. (If filing follow		
orga	nization, specify organization):		neral Liability Adversory Prospective
		Loss Cost Revision	<u> </u>
	\$2.50 		
	* Adjusted to reflect all prior rate ch	anges	
*	* Change in Company's premium le		
	result from application of new rate		
			•
			Wesco Insurance Company
			Name of Company
	The same was the Charles		·
		w	• • •
	1 (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	10 m 1 m 10 m 10 m 10 m 10 m 10 m 10 m	Christopher Zentner, Vice
	* '* 2		President, Compliance
	•		Official - Title
		,	Omoidi - Titio

### DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

NOV 0 3 2008

Form (RF-3)

**SUMMARY SHEET** 

SPRINGFIELD, ILLINOIS

(	Change in Company's premium or rate	ve January 1, 2009	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$298,920	+2.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
rief (	- applicable to all territories and description of filing. (If filing follows e Filing - adoption of ISO Advis	rates of an advisory organization, spec	ify organization):
* C	djusted to reflect all prior rate changes hange in Company's premium level whe sult from application of new rates.		
	•	W	estfield Insurance
			ompany
			Name of Company
			•
			im Tanner, Line of Business pecialist
			Official - Title